

03/07/00

| ISSUE CLASSIFICATION |          |
|----------------------|----------|
| Class                | Subclass |

**PATENT NUMBER**

## U.S. UTILITY Patent Application

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| <p>O.I.P.E. <i>PD</i></p> <p>SCANNED <i>100</i> Q.A. <i>LS</i></p> | PATENT DATE |
|--|-------------|

|                              |            |                     |                 |                  |                     |
|------------------------------|------------|---------------------|-----------------|------------------|---------------------|
| APPLICATION NO.<br>09/520687 | CONT/PRIOR | CLASS<br>713<br>709 | SUBCLASS<br>224 | ART UNIT<br>2787 | EXAMINER<br>D. Wong |
|------------------------------|------------|---------------------|-----------------|------------------|---------------------|

## APPLICANTS

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Diagnostic/remote monitoring by email

# THE

PTO-2040  
12/89

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|  |  |             |                                   |              |
|--|--|-------------|-----------------------------------|--------------|
| <input type="checkbox"/> <b>TERMINAL<br/>DISCLAIMER</b>  | <b>DRAWINGS</b>                              |             | <b>CLAIMS ALLOWED</b>             |              |
|  | Sheets Drwg.                                 | Figs. Drwg. | Print Fig.                        | Total Claims |
| <input type="checkbox"/> The term of this patent<br>subsequent to _____ (date)<br>has been disclaimed.   | _____<br>(Assistant Examiner) (Date)         |             | <b>NOTICE OF ALLOWANCE MAILED</b> |              |
| <input type="checkbox"/> The term of this patent shall<br>not extend beyond the expiration date<br>of U.S Patent. No. _____<br>_____<br>_____  | _____<br>(Primary Examiner) (Date)           |             | <b>ISSUE FEE</b>                  |              |
|  |  |             | Amount Due                        | Date Paid    |
| <input type="checkbox"/> The terminal _____ months of<br>this patent have been disclaimed.   | _____<br>(Legal Instruments Examiner) (Date) |             | <b>ISSUE BATCH NUMBER</b>         |              |
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